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Bib Data Sheet

CONFIRMATION NO. 8498

<b>SERIAL NUMBER</b> 09/786,092	<b>FILING DATE</b> 02/28/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> 33295						
<b>APPLICANTS</b> Costantino Fiori, Echirolles, FRANCE; <b>** CONTINUING DATA *****</b> <i>OK me</i> THIS APPLICATION IS A 371 OF PCT/FR99/02072 08/31/1999 <b>** FOREIGN APPLICATIONS *****</b> <i>OK me</i> FRANCE 98/10902 09/01/1998										
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2					
<b>ADDRESS</b> Pearne Gordon McCoy & Granger 526 Superior Avenue east Suite 1200 Cleveland ,OH 44114-1484										
<b>TITLE</b> Mobile telepayment system for access rights to services for motorists, renewable by remote display paging										
<b>FILING FEE RECEIVED</b> 1130	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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<input type="checkbox"/> 1.18 Fees ( Issue )										
<input type="checkbox"/> Other _____										
<input type="checkbox"/> Credit										

DO/EQ BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 786092 RECEIPT DATE: 02 / 28 / 01  
IA NUMBER: PCT/ FR99 / 02072 IA FILING DATE: 08 / 31 / 99  
FAMILY NAME: FIORI DELAY WAIVED (Y/N): N  
GIVEN NAME: CONSTANTINO DEMAND RECEIVED (Y/N): Y  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 09 / 01 / 98  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 33295 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
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CITY: CLEVELAND

STATE/COUNTRY: OH ZIP: 441141484

EMAIL:

APPLICATION TITLES:

MOBILE SYSTEM OF TELEPAYMENT OF ACCESS RIGHTS TO SERVICES FOR USE BY M  
OTORISTS RENEWABLE REMOTELY BY RADIO PAGING

TAB TO LAST POSITION,PUSH SEND